FEC FORM 1

## STATEMENT OF ORGANIZATION

FORM 1	(See instructions		
	(See instructions	5)	Office use only
NAME OF COMMITTEE (in formal)	ull) (Check if name is changed)	Example: If typying, type over the lines	12FE4M5
REPUBLICAN	NATIONAL COMMITTEE		
ADDRESS (number and s	treet) 310 FIRST STREET SE	<u> </u>	
(Check if addre	ess LIIIII		
is changed)	WASHINGTON		DC 20003 - 111
OOMMITTEEN E MAII		CITY	STATE▲ ZIP CODE ▲
COMMITTEE'S E-MAIL RNC2008@repi			
1			
COMMITTEE'S WEB F	PAGE ADDRESS (URL)		
www.gop.com			
COMMITTEE'S FAX N 2028638609	UMBER		
2. DATE 0 4	/ D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
3. FEC IDENTIFICAT	TION NUMBER C	C00003418	
4. IS THIS STATEM	ENT NEW (N) OR	X AMENDED (A)	
I certify that I have examin	ned this Statement and to the best of my knowl	ledge and belief it is true, correct a	and complete
Type or Print Name of 1	Freasurer Jay C Banning		
Signature of Treasurer	Electronically Filed by Jay C Bann	ing	Date 04 / DD / YYY0 8
NOTE: Submission of fals	se, erroneous, or incomplete information may s		,
Office Use Only FE3AN042.PDF		For further information Federal Election Commis Toll Free 800-424-9530 Local 202-694-1100	

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5.	TYPE OF COI	MMITTEE (Check One)	
	(a)	This committee is a principal campaign committee. (Complete the candidate information below.)	
	(b)	This committee is an authorized committee, and is NOT a principal campaign committee. (Complete tinformation below.)	he candidate
	Name of Candidate		
	Candidate Party Affiliation	Office Sought: House Senate President	State District
	(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
	Name of Candidate	L	
	(d) X	This committee is a NAT (National, State (or subordinate) committee of the REP	(Democratic, Republican,etc.) Party.
	(e)	This committee is a separate segregated fund	
	(f)	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregate committee.	d fund or party
6.	Name of Any	Connected Organization or Affiliated Committee	
	McCain Vict	ory Committee	
L			
	Mailing Addres	228 S. Washington Street	
		Suite 115	
		Alexandria VA	22314
		CITY STATE A	ZIP CODE
	Relationship	Joint Fundraisng Rep	
	Type of Conne	ected Organization:	
	Corpo	ration Corporation w/o Capital Stock Labor Organ	ization
	Mem	pership Organization Trade Association Cooperative	

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W	rite or Type Committee Name						
	REPUBLICAN NATIONA	AL COMMITTEE					
7.	Custodian of Records: Ide possession of Committee	entify by name, address, (phone number books and records.	er optional), and position of	the person in			
	Full Name Jay C I	Banning					
	Mailing Address	ling Address 310 First Street SE					
		Washington	DC	20003 _			
	Title or Position ▼	CITY A	STATE	ZIP CODE A			
	Assistant	Treasurer	Telephone number				
8.	Treasurer: List the name name and address of any	and address (phone number optiona designated agent (e.g., assistant treas	I) of the treasurer of the comurer).	mittee; and the			
	Full Name of Treasurer  Tim Mo	organ					
	Tim M	organ 310 First Street SE					
	of Treasurer Tim Mo			20003			
	of Treasurer Tim Mo	310 First Street SE					
	of Treasurer  Mailing Address	310 First Street SE  Washington  CITY A					
	of Treasurer  Mailing Address  Title or Position ▼  Treasurer  Full Name of Designated	310 First Street SE  Washington  CITY A	STATE <b>A</b>	ZIP CODE A			
	of Treasurer  Mailing Address  Title or Position ▼  Treasurer  Full Name of Designated	310 First Street SE  Washington  CITY A	STATE <b>A</b>	ZIP CODE A			
	of Treasurer  Mailing Address  Title or Position ▼  Treasurer  Full Name of Designated Agent  Jay C I	Washington CITY A	STATE <b>A</b>	ZIP CODE A			
	of Treasurer  Mailing Address  Title or Position ▼  Treasurer  Full Name of Designated Agent  Jay C I	Washington  CITY A  Banning  310 First Street SE	STATE A  Telephone number  202	ZIP CODE <b>A</b>			

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Name of Bank, De	epository, etc.																		
	Wachovi	ia National	Bank										ı			ı			
Mailing Address		1970 CHA	IN BRI	OGE F	ROAL	)						1	1						
													1	ш					
		McLean			1 1	1 1		ı			VΑ			1 1	<b>22</b> 1	102	-		
									_	_									
				CITY	Δ			·		ST	ATE	Δ			ZI	P C	ODE	Δ	,
Name of Bank, De	epository, etc.			CITY	Δ					ST	ATE 4	<u>a</u>			ZI	P C	ODE	Δ	<b>\</b>
Name of Bank, De	epository, etc.  BB&T			CITY	<b>4</b>					ST	ATE 2	<b>4</b>			ZI	P C	ODE	_	
		1909 K Si	reet NV		<b>4</b>					ST	ATE 2				ZI	P C	ODE		
Name of Bank, De		1909 K Si	reet NV		<b>4</b>					ST	ATE 2				ZI	P C	ODE		

CITY 🔼

ZIP CODE 🛕

 $\mathsf{STATE}\, \boldsymbol{\vartriangle}$ 

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Banks or Other Depositoric safety deposit boxes or maint		
Name of Bank, Depository, et	c.	[ ADDITIONAL ]
Mailing Address		
	CITY 🛕	STATE △ ZIP CODE △
Name of Any Connected C	Organization or Affiliated Committee	[ ADDITIONAL ]
McCain Victory 2008		
Mailing Address	228 S. Washington Street	
	Suite 115	
	Alexandria	VA 22314 _
	CITY▲	STATE ▲ ZIP CODE ▲
Joint		STATE ▲ ZIP CODE ▲
Relationship Joint	CITY▲ Fundraisng Rep	STATE A ZIP CODE A
Relationship Joint  Type of Connected Organiza	Fundraisng Rep	STATE A ZIP CODE A
Ticiationship	Fundraisng Rep	STATE A ZIP CODE A  Labor Organization
Type of Connected Organiza	Fundraisng Rep  ation:  Corporation w/o Capital Stock	

Designated Agent		[ ADDITIONAL ]
Full Name		
Mailing Address		
Title or Position ▼	CITY A	STATE A ZIP CODE A
	Tel	elephone number